Food Establishment Inspection Report

Score: 98

Establishment Name: VINCENZO S

Establishment ID: 3034010477

Date: 03 / 25 / 2013 Status Code: A

Time In: 10 : 00 ⊗ am ○ pm Time Out: 12 : 30 ○ am ⊗ pm

Total Time: 2 hrs 30 minutes

Category #: IV

Establishment Type:

Instructions:

1. Fill in the information below for the Food Establishment:

Location Address: 3449 ROBINHOOD ROAD

City: WINSTON-SALEM

State: NC Zip: 27106

County: 34 Forsyth

Permittee: VINCENT PATELLA

Telephone:

⊗ Inspection
○ Re-Inspection

Wastewater System:
⊗ Municipal/Community
○ On-Site System

Water Supply:
⊗ Municipal/Community
○ On-Site System

2. Click/fill the appropriate circle For "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance
N/O=Not Observed, N/A= Not Applicable

3. Click/check the appropriate Boxes for CDI and/or R, VR.

CDI= Corrected During Inspection
R= Repeat Violation
VR= Verification Required

4. Continue to page 2 for "Good Retail Practices".

Foodborne Illness Risk Factors and Public Health Interventions

Risk factors: Contributing factors that increase the chance of developing foodborne illness.
Public Health Interventions: Control measures to prevent foodborne illness or injury.

	Compliance Status		OUT	CDI	R	VR
	Supervision .2652					
1	⊗ IN ○ OUT ○ N/A	PIC Present; Demonstration-Certification by accredited program and perform duties	○ 2 ○ 0	○	○	○
	Employee Health .2652					
2	○ IN ⊗ OUT	Management, employees knowledge; responsibilities & reporting	○ 3 ○ 1.5 ⊗ 0	⊗	○	○
3	○ IN ⊗ OUT	Proper use of reporting, restriction & exclusion	○ 3 ○ 1.5 ⊗ 0	⊗	○	○
	Good Hygienic Practices .2652, .2653					
4	⊗ IN ○ OUT	Proper eating, tasting, drinking, or tobacco use	○ 2 ○ 1 ○ 0	○	○	○
5	⊗ IN ○ OUT	No discharge from eyes, nose, and mouth	○ 1 ○ 0.5 ○ 0	○	○	○
	Preventing Contamination by Hands .2652, .2653, .2655, .2656					
6	⊗ IN ○ OUT	Hands clean & properly washed	○ 4 ○ 2 ○ 0	○	○	○
7	⊗ IN ○ OUT ○ N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ 3 ○ 1.5 ○ 0	○	○	○
8	⊗ IN ○ OUT	Handwashing sinks supplied & accessible	○ 2 ○ 1 ○ 0	○	○	○
	Approved Source .2653, .2655					
9	⊗ IN ○ OUT	Food obtained from approved source	○ 2 ○ 1 ○ 0	○	○	○
10	○ IN ○ OUT ⊗ N/O	Food received at proper temperature	○ 2 ○ 1 ○ 0	○	○	○
11	⊗ IN ○ OUT	Food in good condition, safe & unadulterated	○ 2 ○ 1 ○ 0	○	○	○
12	○ IN ○ OUT ○ N/A ⊗ N/O	Required records available: shellstock tags, parasite destruction	○ 2 ○ 1 ○ 0	○	○	○
	Protection from Contamination .2653, .2654					
13	⊗ IN ○ OUT ○ N/A ○ N/O	Food separated & protected	○ 3 ○ 1.5 ○ 0	○	○	○
14	⊗ IN ○ OUT	Food-contact surfaces: cleaned & sanitized	○ 3 ○ 1.5 ○ 0	○	○	○
15	⊗ IN ○ OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	○ 2 ○ 1 ○ 0	○	○	○
	Potentially Hazardous Food TIme/Temperature .2653					
16	○ IN ○ OUT ○ N/A ⊗ N/O	Proper cooking time & temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
17	○ IN ○ OUT ○ N/A ⊗ N/O	Proper reheating procedures for hot holding	○ 3 ○ 1.5 ○ 0	○	○	○
18	○ IN ○ OUT ○ N/A ⊗ N/O	Proper cooling time & temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
19	○ IN ○ OUT ○ N/A ⊗ N/O	Proper hot holding temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
20	⊗ IN ○ OUT ○ N/A ○ N/O	Proper cold holding temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
21	○ IN ⊗ OUT ○ N/A ○ N/O	Proper date marking & disposition	○ 3 ○ 1.5 ⊗ 0	⊗	○	○
22	○ IN ○ OUT ○ N/A ⊗ N/O	Time as a public health control: procedures & records	○ 2 ○ 1 ○ 0	○	○	○
	Consumer Advisory .2653					
23	○ IN ⊗ OUT ○ N/A	Consumer advisory provided for raw or undercooked foods	○ 1 ○ 0.5 ⊗ 0	⊗	○	○
	Highly Susceptible Populations .2653					
24	⊗ IN ○ OUT ○ N/A	Pasteurized foods used; prohibited foods not offered	○ 3 ○ 1.5 ○ 0	○	○	○
	Chemical .2653, .2657					
25	⊗ IN ○ OUT ○ N/A	Food additives: approved & properly used	○ 1 ○ 0.5 ○ 0	○	○	○
26	⊗ IN ○ OUT ○ N/A	Toxic substances properly identified stored, & used	○ 2 ○ 1 ○ 0	○	○	○
	Conformance with Approved Procedures .2653, .2654, .2658					
27	○ IN ○ OUT ⊗ N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	○ 2 ○ 1 ○ 0	○	○	○

Food Establishment Inspection Report, continued

Establishment Name: VINCENZO S Establishment ID: 3034010477

Instructions, continued:

5. Click the appropriate circle to fill-in for "IN, OUT, N/A, N/O".

   IN= In Compliance, OUT= Not in compliance
   N/O=Not Observed, N/A= Not Applicable

6. Click or check the appropriate boxes for CDI and/or R, VR

   CDI= Corrected during Inspection
   R= Repeat Violation
   VR= Verification Required

   Calculate the "Total Deductions" and record.

7. Sign and complete "Signature Block".

8. Fill in "No. Of Risk Factor Intervention Violations" and "No. of Repeat Risk Factor Intervention Violations".

9. Continue to page 3 for "Comment Addendum to Food Establishment Inspection Report".

Signature Block:

First	*Last*
Vincent	pataca

Person in Charge (Print)

Person in Charge (Signature)

First	*Last*
Clark	Sizemore

Regulatory Authority (Print)

Regulatory Authority (Signature)

Contact Number: (336) 703-3128

Verification Required Date: ___ / ___ / _____

REHS ID: 944 - Sizemore, Clark

No. of Risk Factor/ Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations: _____

Good Retail Practices

Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

	Compliance Status		OUT	CDI	R	VR
	Safe Food and Water	.2653, .2655, .2658				
28	⊗ IN ○ OUT	Pasteurized eggs used where required	○ 1 ○ 0.5 ○ 0	○	○	○
29	⊗ IN ○ OUT	Water and ice from approved source	○ 2 ○ 1 ○ 0	○	○	○
30	○ IN ○ OUT ⊗ N/A	Variance obtained for specialized processing methods	○ 1 ○ 0.5 ○ 0	○	○	○
	Food Temperature Control	.2653, .2654				
31	⊗ IN ○ OUT	Proper cooling methods used; adequate equipment for temperature control	○ 1 ○ 0.5 ○ 0	○	○	○
32	○ IN ○ OUT ○ N/A ⊗ N/O	Plant food properly cooked for hot holding	○ 1 ○ 0.5 ○ 0	○	○	○
33	⊗ IN ○ OUT ○ N/A ○ N/O	Approved thawing methods used	○ 1 ○ 0.5 ○ 0	○	○	○
34	⊗ IN ○ OUT	Thermometers provided & accurate	○ 1 ○ 0.5 ○ 0	○	○	○
	Food Identification	.2653				
35	⊗ IN ○ OUT	Food properly labeled: original container	○ 2 ○ 1 ○ 0	○	○	○
	Prevention of Food Contamination	.2652, .2653, .2654, .2656, .2657				
36	⊗ IN ○ OUT	Insects & rodents not present; no unauthorized animals	○ 2 ○ 1 ○ 0	○	○	○
37	⊗ IN ○ OUT	Contamination prevented during food preparation, storage & display	○ 2 ○ 1 ○ 0	○	○	○
38	⊗ IN ○ OUT	Personal cleanliness	○ 1 ○ 0.5 ○ 0	○	○	○
39	⊗ IN ○ OUT	Wiping cloths: properly used & stored	○ 1 ○ 0.5 ○ 0	○	○	○
40	⊗ IN ○ OUT	Washing fruits & vegetables	○ 1 ○ 0.5 ○ 0	○	○	○
	Proper Use of Utensils	.2653, .2654				
41	⊗ IN ○ OUT	In-use utensils: properly stored	○ 1 ○ 0.5 ○ 0	○	○	○
42	○ IN ⊗ OUT	Utensils, equipment & linens: properly stored, dried & handled	○ 1 ⊗ 0.5 ○ 0	○	○	○
43	⊗ IN ○ OUT	Single-use & single-service articles: properly stored & used	○ 1 ○ 0.5 ○ 0	○	○	○
44	○ IN ⊗ OUT	Gloves used properly	○ 1 ○ 0.5 ⊗ 0	○	○	○
	Utensils and Equipment	.2653, .2654, .2663				
45	⊗ IN ○ OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	○ 2 ○ 1 ○ 0	○	○	○
46	○ IN ⊗ OUT	Warewashing facilities: installed, maintained, & used; test strips	○ 1 ○ 0.5 ⊗ 0	○	○	○
47	○ IN ⊗ OUT	Non-food contact surfaces clean	⊗ 1 ○ 0.5 ○ 0	○	○	○
	Physical Facilities	.2654, .2655, .2656				
48	⊗ IN ○ OUT	Hot & cold water available; adequate pressure	○ 2 ○ 1 ○ 0	○	○	○
49	⊗ IN ○ OUT	Plumbing installed; proper backflow devices	○ 2 ○ 1 ○ 0	○	○	○
50	⊗ IN ○ OUT	Sewage & waste water properly disposed	○ 2 ○ 1 ○ 0	○	○	○
51	⊗ IN ○ OUT	Toilet facilities: properly constructed, supplied & cleaned	○ 1 ○ 0.5 ○ 0	○	○	○
52	⊗ IN ○ OUT	Garbage & refuse properly disposed; facilities maintained	○ 1 ○ 0.5 ○ 0	○	○	○
53	○ IN ⊗ OUT	Physical facilities installed, maintained & clean	○ 1 ⊗ 0.5 ○ 0	○	○	○
54	○ IN ⊗ OUT	Meets ventilation & lighting requirements; designated areas used	○ 1 ○ 0.5 ⊗ 0	○	○	○
		Total Deductions:	2			

Comment Addendum to Food Establishment Inspection Report

Establishment Name: VINCENZO S

Establishment ID: 3034010477

Date: 03/25/2013

Status Code: A

Category #: IV

Email 1:

Email 2:

Email 3:

Location Address: 3449 ROBINHOOD ROAD

City: WINSTON-SALEM State: NC

County: 34 Forsyth Zip: 27106

Wastewater System: ⊗ Municipal/Community ○ On-Site System

Water Supply: ⊗ Municipal/Community ○ On-Site System

Permittee: VINCENT PATELLA

Telephone:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
hamburger	make unit	31	egg plant	up right	35			
pizza dough	make unit	35	chicken	up right	37			
peppers	make unit	31						
lettuce	glass door up right	43						
pork	cooler	38						
cheese	cooler	36						
pasta	cooler	40						
lasagna	cooler	38						

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

Spell

2 Must inform all employees when to report out sick due to illness.
2-103.11 (M) Person in Charge-Duties
2-201.11 (A), (B), (C), & (E) Responsibility of Permit Holder, Person in Charge, and Conditional Employees

3 Employees must be trained when to report food borne illness.
2-201.12 Exclusions and Restrictions

21 All food held for more that 24 hours in the walk in or other refrigeration must be date marked on the container the date the food was placed in the refrigeration.
3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking
3-501.18 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Disposition

23 If any meat,poultry,seafood, shell fish or eggs is offered raw or under cooked a written disclosure must be posted such as : Consuming raw or undercooked Meats,Poltry,sea food,shellfish,or Eggs may increase your RISK of food borne illness.

Comment Addendum to Food Establishment Inspection Report

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Observations and Corrective Actions

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42 Need to air dry steel and plastic containers before stacking.
4-901.11 Equipment and Utensils, Air-Drying Required

44 Did not observe glove use, if using gloves they must be used properly.
3-304.15 (B)-(D) Gloves, Use Limitations

46 Need to pre clean all steel food containers before washing in machine some steel food containers had food particles in them after they were stacked as clean. Food particles found on three containers.4-603.12 Pre cleaning

47 Need to clean the following: under work tables, outside of fryers, up right refrigeration, grill, sides of grill, oven doors, oven handles, in side up rights, hinges of flip top at make unit, inside glass door refrigerator, flour container, outside of proofing pans, and splash on cabinets.
4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils
4-602.13 Nonfood Contact Surfaces

53 Need to clean splash from walls and electrical wirning on walls in kitchen.
6-501.12 Cleaning, Frequency and Restrictions

54 Some flour dust in hood today.
6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition

Comment Addendum to Food Establishment Inspection Report

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Spell